

License #: \_\_\_\_\_

Check #: \_\_\_\_\_

\$ \_\_\_\_\_

Date Issued: \_\_\_\_\_



**The Borough of Mendham**  
"Preserving the Past - Building the Future"  
www.mendhamnj.org

**Return Application to:**

Pet Licensing  
Phoenix House  
2 W. Main St.

Mendham, NJ 07945

**Questions:**

ptimoney@mendhamnj.org

**DOG LICENSE APPLICATION**

**APPLICATION INSTRUCTIONS**

Please complete application in **full**. One application per animal. License fee must accompany this application. Checks payable to "Borough of Mendham". Cash payments are only accepted in person. Please mail your application to address above. License fees are as follows:

**Dogs Neutered or Spayed.....\$15.00**

**Dogs Not Neutered or Spayed.....\$18.00**

**\*\*Late Fee...\$10.00**

**\*\*Late fees are applied per animal if renewal license is not obtained by February 1st of the licensing year.**

Date of Application: \_\_\_\_\_

Application is for (Check One):

**New License**

**Renewal of License**

**Owner Information**

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Cell #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency #: \_\_\_\_\_

**Dog's Information**

Is the Dog spayed or neutered?\*    Yes    No

Dog's Name: \_\_\_\_\_

Dog's Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Breed: \_\_\_\_\_

Color/Markings: \_\_\_\_\_

Hair Length (Check One):

Short Hair

Medium Hair

Long Hair

Sex:  Male  Female

❖ **Proof of Spay/Neuter Required for New Licenses**

❖ **Proof of Rabies Immunization Must Be Provided and Must Not Expire Before November 1st of the Licensing Year**

**Rabies Expiration Date\*:** \_\_\_\_\_

**Owner's Signature:** \_\_\_\_\_

*I certify that the information provided herein is true to the best of my knowledge.*

**Microchip # (If Applicable):** \_\_\_\_\_